

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Daniel		04-17-01
O.I.P.E. CLASSIFIER		8	5-80/
FORMALITY REVIEW	A.T	1071	06/06/01
RESPONSE FORMALITY REVIEW	Self	1091	10-22-01

INDEX OF CLAIMS

✓ Rejected
 " Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

BEST AVAILABLE COPY

Claim	Date
Final	
Original	
1	3/02
2	6/02
3	1/03
4	4/03
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12	✓
13	✓
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15	✓
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21	✓
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23	N
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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